I N	Agenc	y Name		VSTON-SALEN	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2439913				
C ·	ORI	NG				<u> </u>	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time				
D E			NC 034										TI FI SI	11   05   2024  17:24 Hrs.				
N T	#1	Jimic II	iciaciii(s	, Missing Pe		Att   At Found   SM							Month Day Yr Time					
D .	#2	Crime I	ncident	1111551118 1 0	5071				$\rightarrow$	Location			1/	.24   1115	11			Offense Tract
A		~ · •						_	Com			owview	Dr,	Winston-s	salem			213
T A	#3	Jrime I	ncident						☐ Att Premise Type ☐ Com						Victim Residence Type  ☐ Single Family ☐ Multi Family			
МО			d or Com											Forcible	T NI/A	_	apon / Tools	,
МО	DATA OMITTED														X N/A			
V	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																	
	1			igious   L.E. Off					know	. –				Severe	Lacera Other	tions Majo		s □ Unknown □ N/A
I C		Victim/	Business	Name (Last, First,	le)			Victim of DO Crime #					3 / Age	Race		Relationship To Offender	Resident Status Resident	
T I	V1		DA	ΓA OMITTED		1,						44	$\left \begin{array}{c} w \end{array}\right $		10 Offender	☐ Non-Resident		
M ·	Home	Addre	\$5									VV	Hon	ne Phone	Unknown			
					ATA OMI	ITTED												
	Emplo	oyer Na	me/Addı	ress	D.	ATA OMI	A OMITTED						Business Phone					
	VYR	Color		Lic	:/Lis				Vin									
O T																		
Н																		
E R																		
S																		
I	DATA OMITTED																	
N																		
o O																		
L V																		
E D																		
Status																		
Codes	(Chec Victim			f recovered for other									Make/Model Serial Number					
	#	# DCI Status Value OJ QTY Pro							roperty Description						Mak	e/Mo		rial Number TA OMITTED
P - R - O																		FOR
																		FORMATION
					+													SECURITY PURPOSES
P					$\dashv$													T CITA OBEB
E - R _																		LY THE FIRST
Т Ү -																		VE PROPERTY
Y																		ITEMS ARE
-					+													SPLAYED ON 2C REPORTS
-					_													
			ehicles S			nber Vehic	cles Recovere		0									
ID	Office:		W. R. (1	ID (6325)	Officer Sig	Officer Signature Supervisor Signature BOYD, K. E. (15702)									702)			
			Signatur		Case Status	tus Case Disposition:												
Status						Inact	☐ Further Investigation ☐ Unfounded ☐ Loc. ☐ Cleared by Arrest ☐						rest $\square$	Refuse	e to C	ooperate	adition Declined	
							Closed/Cleared Cleared by Arrest by Anot							ther Ag	gency		Page 1	